

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lin
Township of Lynchburg
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—for State Registrar Only

35305

Registration District No. 3002 Registered No. 138
(For use of Local Registrar)

(No. St. Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Nathaniel Scarborough (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in case of Twin or Triplet (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Oct. 13, 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Luther Scarborough
(9) PRESENT POSTOFFICE OF FATHER Lynchburg S.C.
(10) COLOR OR RACE Wg (11) AGE AT LAST BIRTHDAY 26
(Years)
(12) BIRTHPLACE Lin Co. S. C.
(13) OCCUPATION Farmer

MOTHER.
(14) NAME BEFORE MARRIAGE Gennie Wilson
(15) PRESENT POSTOFFICE OF MOTHER Lynchburg S.C.
(16) COLOR OR RACE Wg (17) AGE AT LAST BIRTHDAY 23
(Years)
(18) BIRTHPLACE Lin Co. S. C.
(19) OCCUPATION House work

(20) Number of children born to mother, including present birth 4 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Merna Anderson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Lynchburg S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 11/8 1922 (28) J. F. McIntosh Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.